Case 20-20487-GLT Doc 103 Filed 05/04/22 Entered 05/04/22 10:01:11 Desc Main in the unfred of the bank for the Western district of Pennsylvania

1In Re:	: Bankruptcy No. 20-20487-GLT
JAMIEE L. DESIMONE,	
:	
Debtor :	Chapter 13
JAMIEE L. DESIMONE,	Chapter 13
·	
Movant	
	:
v.	: :
	:
No Respondent:	
AMENDN	MENT COVER SHEET
Amendment(s) to the following petition, list(s), sc	hedule(s), or statement(s) are transmitted herewith:
Voluntary Petition - Specify reason for am	a and mant
Official Form 6 Schedules (Itemization of	
Summary of Schedules	Changes Wast De Specifica)
Schedule A - Real Property	
Schedule B - Personal Property –	
Schedule C - Property Claimed as Exemp	ıt
Schedule D - Creditors holding Secured C	
Check one:	
Creditor(s) added	
NO creditor(s) added	
Creditor(s) deleted	
Schedule E - Creditors Holding Unsecured	d Priority Claims
Check one:	•
Creditor(s) added	
NO creditor(s) added	
Creditor(s) deleted	
Schedule F - Creditors Holding Unsecured	d Nonpriority Claims
Check one:	
Creditor(s) added	
NO creditor(s) added	
Creditor(s) deleted	
Schedule G - Executory Contracts and Un	expired Leases
Check one:	
Creditor(s) added	
NO creditor(s) added	
Creditor(s) deleted	
Schedule H - Codebtors	- 1 /
	Debtor(s) – non-filing spouse no longer in house
XSchedule J - Current Expenditures of Indiv	vidual Debtor(s)
Statement of Financial Affairs	
Chapter 7 Individual Debtor's Statement o	of Intention

Chapter 11 List of Equity Chapter 11 List of Credit			Desc Main
Date: _5/4/2022	Chris	<u>Christian M. Rieger</u> stian M. Rieger, Esquire 307037	
	Suite Pittsb (412)	Sidney Street 214 burgh, PA 15203) 381-8809) 381-4594 (fax)	
	crieg	erlaw@gmail.com	

Note: An amended matrix of creditors added by the amendment must be submitted on disk with the amendment. Attorneys filing electronically on the Case Management/Electronic Case Filing System may add creditors to the case electronically.

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Fill in this information to	o identify your case:	
Debtor 1	Jamiee L DeSimone	
Debtor 2 (Spouse, if filing)		
United States Bankrup	tcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA	
	20487	Check if this is:
(If known)		An amended filing A supplement showing postpetition chapter
Official Form	<u>106I</u>	13 income as of the following date: 5/2/2022 MM / DD/ YYYY
Schedule I: '	Your Income	12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
you have more than one job,	Employment status	✓ Employed	Employed
attach a separate page with information about additional	zp.oyon	□ Not employed	■ Not employed
employers.	Occupation	Medical Assistant	_
Include part-time, seasonal, or self-employed work.	Employer's name	Davita	_
Occupation may include student or homemaker, if it applies.	Employer's address	32275 32nd Avenue South Federal Way, WA 98001	_
	How long employed the	here? 2 years	

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

0.00

+\$

N/A

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

For Debtor 1

For Debtor 2 or non-filing spouse

2. \$ 6,224.25 \$ N/A

. Calculate gross Income. Add line 2 + line 3. 4. \$ 6,224.25 \$ N/A

Estimate and list monthly overtime pay.

Official Form 106I Schedule I: Your Income page 1

Deb	or 1	Jamiee L DeSimone		Case r	number (if known)	20-20	487		
					Debtor 1		ebtor iling s	2 or pouse	
	Copy	y line 4 here	4.	\$	6,224.25	\$		N/A	<u> </u>
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,075.21	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$		N/A	<u> </u>
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$		N/A	1
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$		N/A	
	5e.	Insurance	5e.	\$	10.83	\$		N/A	_
	5f.	Domestic support obligations	5f.	\$	0.00	\$		N/A	
	5g.	Union dues	5g.	\$_	0.00			N/A	
	5h.	Other deductions. Specify: Parking	5h.+	· —	6.50	+ \$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,092.54	\$		N/A	_
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	5,131.71	\$		N/A	<u>\</u>
8.	List a	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$		N/A	
	8c. 8d. 8e.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security	8c. 8d. 8e.	\$ \$	0.00 0.00 0.00	\$ 		N/A N/A N/A	<u> </u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$ \$	0.00	\$		N/A	_
	8g.	Pension or retirement income	8g.	\$	0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	+ \$		N/A	<u>\</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$		N/	A
10	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		5,131.71 + \$		N/A	= \$	5,131.71
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			-			-	0,101.71
11.	State Inclu- other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your rifiends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a	depen				hedule		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain es					12.	\$	5,131.71
13.	Do y	ou expect an increase or decrease within the year after you file this form? No.	?					Combi month	ned ly income
	V	Yes. Explain:							

Fill in	this information to identify your case:				
Debto	Jamiee L DeSimone		_	eck if this is: An amended filing	
Debto	or 2		√	•	wing postpetition chapter
(Spou	use, if filing)	-	T.	13 expenses as of	f the following date:
United	d States Bankruptcy Court for the: WESTERN DISTRICT OF PENNS	YLVANIA		5/2/2022 MM / DD / YYYY	
Case (If kno	number 20-20487 own)				
Off	icial Form 106J				
Sc	hedule J: Your Expenses				12/15
numl Part	s complete and accurate as possible. If two married people are mation. If more space is needed, attach another sheet to this feber (if known). Answer every question. 1: Describe Your Household Is this a joint case? Very No. Go to line 2. Yes. Does Debtor 2 live in a separate household?				
	 No ✓ Yes. Debtor 2 must file Official Form 106J-2, Expenses 	for Separate Househ	old of D	ebtor 2.	
2.	Do you have dependents? No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the dependents names.	Daughter		10	□ No ✓ Yes
		Daughter		13	│ No
	Do your expenses include expenses of people other than yourself and your dependents?				Yes
expe	Estimate Your Ongoing Monthly Expenses nate your expenses as of your bankruptcy filing date unless your expenses as of a date after the bankruptcy is filed. If this is a supplicable date.				
the v	de expenses paid for with non-cash government assistance if ralue of such assistance and have included it on <i>Schedule I:</i> Yocial Form 106I.)			Your exp	penses
	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	clude first mortgage	4.	\$	1,705.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b.	·	67.00
	4c. Home maintenance, repair, and upkeep expenses		4c.	\$	0.00
	4d. Homeowner's association or condominium dues		4d.	·	25.00
5.	Additional mortgage payments for your residence, such as hon	ne equity loans	5.	\$	0.00

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